

215047690
70196

State of Nebraska
Investigator's Motor Vehicle Accident Report

Sheet 1 of 2

2	Total Number of Vehicles	Local No./ District 105	Agency Case No. B5-107356	HIT & RUN? <input type="radio"/> YES <input checked="" type="radio"/> NO	INVESTIGATION MADE AT SCENE? <input checked="" type="radio"/> YES <input type="radio"/> NO	L 1
A/1	DATE OF ACCIDENT	M M / D D / Y Y Y Y S M T W T H F S 11/17/2015		(In Military Time) TIME OF ACCIDENT 1620	STATE USE ONLY	
A/2	PLACE OF ACCIDENT	COUNTY Lancaster	CITY Lincoln	POLICE NOTIFIED 1622	11/17/2015	
B	ROAD ON WHICH ACCIDENT OCCURRED	STREET/ HIGHWAY NO. S 48th St/Van Dorn-Antelope Creek Rd			PRIVATE PROPERTY? <input type="radio"/> YES <input checked="" type="radio"/> NO	LATITUDE
C	DISTANCE FROM MILEPOST	FEET	N S E W OF MILEPOST	HIGHWAY NO.	LONGITUDE	
D	IF AT INTERSECTION			IF NOT AT INTERSECTION		
1	NAME OF INTERSECTING ROADWAY			<input checked="" type="radio"/> FEET <input type="radio"/> MILES	N S E W	OF NEAREST STREET, BRIDGE, RAILROAD CROSSING
V1/M	48.00			X	Antelope Creek Rd	
V2/M	IF ACCIDENT WAS OUTSIDE CITY LIMITS, INDICATE DISTANCE FROM NEAREST TOWN					
01	MILES			N S E W	AND MILES	OF NEAREST CITY OR TOWN
E	R. WORK ZONE CODES	R1 R2 R3 R4	S. PEDESTRIAN CLASSIFICATION CODES	S1 S2 S3 S4 S5-a S5-b S6-a S6-b	DOES ACCIDENT INVOLVE DAMAGE TO STATE DEPT. OF ROADS' PROPERTY? <input type="radio"/> YES <input checked="" type="radio"/> NO	
2	VEHICLE NO. 1					
F	DRIVER LICENSE NO.	H12143142		STATE (Of License)	NE	SEX <input type="radio"/> FEMALE <input checked="" type="radio"/> MALE
V1/N	DRIVER JASON R EWING		PHONE 4023107206	LOCAL NO.		
V2/N	DRIVER ADDRESS 402 MAPLE ST, HICKMAN, NE 68372		CITY, STATE, ZIP	DATE OF BIRTH (MM / DD / YYYY)	11/03/1976	
G	OWNER WELLMAN PLUMBING INC		PHONE 4024342400	LOCAL NO.		
5	OWNER ADDRESS 3130 S 6th St #100, Lincoln, NE 68502		CITY, STATE, ZIP	CITATION <input checked="" type="radio"/> YES <input type="radio"/> PENDING <input type="radio"/> NO	CITATION NO. LB497852	
H	LICENSE PLATE	TE NO. SPG365	YEAR (Plate Expires)	2016	STATE (Of Plate)	NE
V1/O	VEHICLE	2001	MAKE Dodge	MODEL Ram 1500	BODY STYLE Pickup truck	COLOR white
2	VEHICLE ID NO. (VIN)	1B7HC16X11S228129		ESTIMATED DAMAGE <input type="radio"/> TOALED \$ 1500		
V2/O	TOWED TO	TOWED BY		INSURANCE COMPANY Unico Group		
2	POLICY NO.		60433525			
I	VEHICLE NO. 2					
1	DRIVER LICENSE NO.	H13111300		STATE (Of License)	NE	SEX <input type="radio"/> FEMALE <input checked="" type="radio"/> MALE
V1/P	DRIVER KAITLIN R RICHARD		PHONE 4024161792	LOCAL NO.		
V2/P	DRIVER ADDRESS 5428 PIONEERS BLVD #7, LINCOLN, NE 68506		CITY, STATE, ZIP	DATE OF BIRTH (MM / DD / YYYY)	10/07/1989	
1	OWNER REX C RICHARD		PHONE 4029045180	LOCAL NO. 05/23/1956		
J	OWNER ADDRESS 5428 PIONEERS BLVD #7, LINCOLN, NE 68506		CITY, STATE, ZIP	CITATION <input type="radio"/> PENDING <input checked="" type="radio"/> YES <input type="radio"/> NO	CITATION NO.	
V1/Q	LICENSE PLATE	PA NO. SXX107	YEAR (Plate Expires)	2015	STATE (Of Plate)	NE
V2/Q	VEHICLE	1995	MAKE Toyota	MODEL Camry	BODY STYLE 4 door Sedan	COLOR tan
4	VEHICLE ID NO. (VIN)	4T1SK12E8SU609023		ESTIMATED DAMAGE <input type="radio"/> TOALED \$ 2000		
K	TOWED TO	TOWED BY		INSURANCE COMPANY State Farm Insurance		
01	POLICY NO.		041 8798-F01-27C			
Complete this section for all injured persons (Complete a continuation report, if more than three were injured)				DATE OF BIRTH (MM / DD / YYYY)	1 2 3 4 5	SEX M F
VEH. #	NAME	ADDRESS		Seat Position	Eject	Body Region
	LOCAL NO.	MEDICAL FACILITY NAME		Injury Sev.	Trans.	
VEH. #	NAME	ADDRESS		EMS RUN REPORT NO.		
	LOCAL NO.	MEDICAL FACILITY NAME		EMS RUN REPORT NO.		
VEH. #	NAME	ADDRESS		EMS RUN REPORT NO.		
	LOCAL NO.	MEDICAL FACILITY NAME		EMS RUN REPORT NO.		

THE FOLLOWING INFORMATION IS REQUIRED FOR ALL ACCIDENTS

INDICATE BY DIAGRAM WHAT HAPPENED

AGENCY CASE NO.
B5-107356



Indicate
North
by Arrow

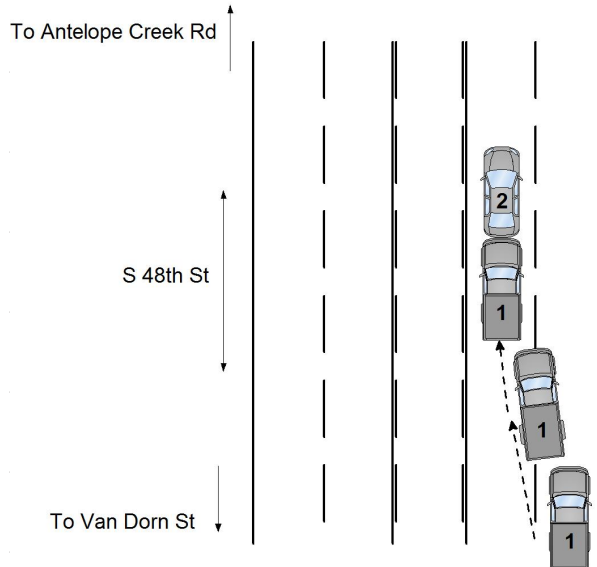


Not To Scale

Measurements not exact

POI

48 ft S of S curb Antelope Creek Rd
18 ft W of E curb S 48th St



DESCRIPTION OF ACCIDENT BASED ON OFFICER'S INVESTIGATION

Vehicle 1 rear ended vehicle 2, as both were traveling NB on S 48th St, in the inside thru lane, just south of Antelope Creek Rd.

Driver 2 stated she was either slowing down or completely stopped behind traffic, NB on S 48th St, when she was rear ended by vehicle 1.

Driver 1 stated he had just switched into the inside thru lane on S 48th St, NB, behind vehicle 2. Driver 1 said after he switched lanes, when he looked back forward, he realized vehicle 2 was stopped. Driver 1 said he attempted to slam on his brakes, but the ground was wet and he rear ended vehicle 2.

Driver 1 was cited/released for Follow Too Closely.

PROPERTY	OBJECT DAMAGED	OWNER NAME	ADDRESS	PHONE	APPROX. COST OF DAMAGE \$
	OBJECT DAMAGED	OWNER NAME	ADDRESS	PHONE	APPROX. COST OF DAMAGE \$
WITNESSES	NAME				PHONE
	NAME				PHONE

VEHICLE MOVEMENT BEFORE COLLISION				POINT OF IMPACT AND MOST DAMAGED AREA <i>(Enter numbers for each vehicle)</i>				AIRBAG DEPLOYED VEHICLE 1		RESTRAINT USE VEHICLE 1		TOTAL OCCUPANTS									
VEH NO.	N	S	E	W	ROAD OR HIGHWAY NAME		VEHICLE 1		VEHICLE 2		VEHICLE 1		VEHICLE 2		VEH 1	1	VEH 2	2			
1	X				S 48th St		POINT OF IMPACT	01	POINT OF IMPACT	05	<div style="border: 1px solid black; width: 40px; height: 40px; margin: 2px; text-align: center; line-height: 40px;">4</div>		<div style="border: 1px solid black; width: 40px; height: 40px; margin: 2px; text-align: center; line-height: 40px;">2</div>		ALCOHOL TESTING	Driver No. 1	Driver No. 2	Pedestrian			
2	X				S 48th St		POINT OF IMPACT	01	POINT OF IMPACT	05	<div style="border: 1px solid black; width: 40px; height: 40px; margin: 2px; text-align: center; line-height: 40px;">4</div>		<div style="border: 1px solid black; width: 40px; height: 40px; margin: 2px; text-align: center; line-height: 40px;">2</div>		ALCOHOL LEVEL TESTED	Y	X	Y	X	Y	X
1	01	06 Turning left				MOST DAMAGED AREA	01	MOST DAMAGED AREA	05	<div style="border: 1px solid black; width: 40px; height: 40px; margin: 2px; text-align: center; line-height: 40px;">4</div>		<div style="border: 1px solid black; width: 40px; height: 40px; margin: 2px; text-align: center; line-height: 40px;">2</div>		BAC LEVEL							
2	11	08 Entering traffic lane				<div style="border: 1px solid black; width: 100px; height: 40px; position: relative;"> <div style="position: absolute; left: 0; top: 0; width: 100%; height: 100%; background: repeating-linear-gradient(45deg, transparent, transparent 2px, black 2px, black 4px);"></div> </div>		<div style="border: 1px solid black; width: 40px; height: 40px; margin: 2px; text-align: center; line-height: 40px;">4</div>		<div style="border: 1px solid black; width: 40px; height: 40px; margin: 2px; text-align: center; line-height: 40px;">2</div>		ALCOHOL/ DRUGS SUSPECTED <div style="display: flex; justify-content: space-between;"> <div>1 Neither alcohol nor drugs suspected</div> <div>2 Yes - alcohol suspected</div> <div>3 Yes - drugs suspected</div> <div>4 Yes - alcohol & drugs suspected</div> <div>5 Unknown</div> </div>									
01 Essentially straight ahead		09 Leaving traffic lane		02 Backing		10 Parked		03 Changing lanes		11 Slowing or stopped in traffic		04 Overtaking/ Passing		12 Other		05 Turning right		13 Unknown			

OFFICER NO. 1725	TROOP/ TEAM/ BEAT 11	DEPARTMENT Lincoln Police Department	Photographs taken? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
INVESTIGATOR NAME <i>(Print or Type)</i> Alessandra Welch		INVESTIGATOR SIGNATURE Approved by Ofc Alessandra Welch	
DATE OF REPORT 11/17/2015			